



U.S. Department of Justice

Federal Bureau of Prisons

Mid-Atlantic Regional Office

302 Sentinel Drive, Suite 200
Annapolis Junction, Maryland 20701

April 27, 2011

Hunter P. Smith, Jr.
Assistant United States Attorney
United States Courthouse
300 Virginia Street, East, Room 4000
Charleston, West Virginia 25301

RE: FERRELL, Joseph

Dear Smith,

This letter is provided as information you requested regarding the capability of the Federal Bureau of Prisons to care for an individual diagnosed with diabetes mellitus, coronary artery disease, hypertension, hyperlipidemia, anemia, peripheral vascular disease, chronic pain syndrome, diabetic neuropathy, right ankle tibialis posterior tendon dysfunction, rupture left Achilles tendon, diabetic retinopathy, dental abscess, benign prostatic hypertrophy, anxiety and depression, gout, gastric esophageal reflux disease, and venous stasis of the lower extremities. Specifically, you request information regarding continuity of care, continuation of prescribed medications, follow-up cardiology treatment, and availability of follow-up orthopaedic treatment.

I reviewed the documentation received from your office, specifically, a Life Care Plan for Joseph Ferrell, dated April 8, 2011, completed by Susan Riddick-Grisham, R.N.

Review of the documentation provided reveals Mr. Ferrell is a 63 year old male diagnosed with various chronic medical conditions as outlined in my initial paragraph of this letter. The documentation outlines Mr. Ferrell's care requirements including taking 25-30 medications each day, orthopaedic follow-up every 6 weeks, primary care physician follow-up every 4-6 weeks, cardiology follow-up every 3-4 months, podiatry treatment 4 times per year, and ophthalmology testing twice yearly. The plan references each of Mr. Ferrell's chronic conditions and outlines specific related medical needs, such as access to diabetic testing equipment, regularly scheduled nutritional meals, access to bathing facilities for the completion of daily foot care, periodic clinical laboratory testing, access to dental care, use of grab bars during bathing, specialized footwear and orthotics, intermittent steroid injections of joints, and use of compression stockings.

Ms. Riddick-Grisham concludes her report with a synopsis of associated costs for the provision of medical care for a three year period.

Following extensive review, I discussed your questions and concerns with the Mid-Atlantic Regional Medical Director, Central Office, Federal Bureau of Prisons. I was informed treatment of chronic medical conditions, similar to Mr. Ferrell's, to include continuity of care, continuation of prescribed medications, follow-up cardiology treatment, and availability of follow-up orthopaedic treatment is accomplished on a regular basis within

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our correctional facilities. Additionally, Mr. Farrell's specific medical needs outlined in the documentation, to include access to diabetic testing equipment, regularly scheduled nutritional meals, access to bathing facilities for the completion of daily foot care, periodic clinical laboratory testing, access to dental care, use of grab bars during bathing, specialized footwear and orthotics, intermittent steroid injections of joints, and use of compression stockings, are common needs for many inmates confined to Bureau of Prisons facilities.

Following discussion, the Regional Medical Director recommended initial designation of this individual to a Federal Medical Center, (FMC) for the provision of medical assessment and to ensure continuity of care.

The Federal Bureau of Prisons maintains five Federal Medical Centers (FMC) for male offenders and one for female offenders. The Federal Medical Centers are accredited by the Joint Commission and are medical facilities capable of providing specialized medical, surgical, or mental health care in a correctional environment. Facilities for male offenders are located in Butner, North Carolina, (FCC Butner) Lexington, Kentucky, (FMC Lexington) Ayers, Massachusetts, (FMC Devens) Springfield, Missouri, (USMCFP Springfield) and Rochester, Minnesota, (FMC Rochester). Additionally, the Federal Bureau of Prisons maintains two United States Penitentiaries (USP Terre Haute, Indiana, and USP Tucson, Arizona) and two Federal Correctional Institutions (FCI Fort Worth, Texas, and FCI Terminal Island, California) as Care III medical facilities. These facilities have an extended medical mission to address and care for inmates with chronic medical conditions.

The Federal Bureau of Prisons adheres to National Safety goals set in place by the Joint Commission, and Bureau of Prisons facilities are routinely reviewed using the same criteria as civilian health care facilities. Every new inmate entering the Federal Bureau of Prisons will have a medication reconciliation process and a review of care requirements performed at the time of admission. This process assures continuity of private physician prescribed medications (or appropriate equivalent medications) and recommended therapies to be prescribed. This process is used in conjunction with inmate health screening in a Receiving and Discharge unit for timely and appropriate continuity of care. Inmates' medical and surgical requirements are reviewed and medications are prescribed immediately upon admission to insure continuity in an effective and timely manner.

Based on your request, I can easily confirm the Federal Bureau of Prisons can properly treat an individual diagnosed with diabetes mellitus, coronary artery disease, hypertension, hyperlipidemia, anemia, peripheral vascular disease, chronic pain syndrome, diabetic neuropathy, right ankle tibialis posterior tendon dysfunction, rupture left Achilles tendon, diabetic retinopathy, dental abscess, benign prostatic hypertrophy, anxiety and depression, gout, gastric esophageal reflux disease, and venous stasis of the lower extremities. Additionally, this individual would be assigned to a specialized Chronic Care Clinic and would be monitored on a regularly scheduled basis.

I trust this response will answer your questions and assist you in responding to the court. Should you have any questions or additional concerns, please do not hesitate to contact me.

Sincerely,


Robert Ellis

Regional Health Services Administrator